

CHAPTER 1 SECTION 26.2

OBSTRUCTIVE SLEEP APNEA SYNDROME (OSAS)

Issue Date: October 26, 1994

Authority: [32 CFR 199.4\(a\)\(1\)](#)

I. PROCEDURE CODES

21141 - 21193, 21198, 21499, 42145, 70350, 92511, 94660, 95808 - 95811

II. DESCRIPTION

Sleep Apnea Syndromes. This is a collective term used to describe a variety of syndromes wherein the patient stops breathing for multiple periods during sleep. It is classified as resulting from obstructive disturbances of the upper airway (OSAS), from central lesions (CSAS), or from mixed causes (MSAS). In sleep apnea, the arterial oxygen saturation decreases as a consequence of the apneic periods. Cardiac arrhythmic may develop and acute elevations of systemic arterial pressure can occur. Depending on the loss of sleep and rest, the patient exhibits varying degrees of fatigue and daytime somnolence, loss of efficiency, and poor performance. Snoring is common and may be the chief complaint. In more marked situations, pulmonary hypertension may lead to right heart failure, fibrillation, and other symptoms of pulmonary insufficiency. OSAS significantly increases mortality rate.

III. POLICY

Diagnostic testing for Obstructive Sleep Apnea Syndrome is a covered benefit. An FDA approved dental orthosis may be covered for the treatment of OSAS. The device must be used for the treatment of OSAS and not for adjunctive dental.

- END -

